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WRITTEN TESTIMONY TO THE APPROPRIATIONS COMMITTEE
DECEMBER 9, 2009

As the President/CEO of the Southwest Community Health Center, I must comment on the Governor's Proposed Deficit Mitigation Plan for Fiscal Year 2010. Many of these proposed cuts to the health programs that the State's impoverished and economically disadvantaged residents rely upon are severe and draconian. **Over \$19,264,000** of the program funding cuts that require Legislative approval, will have a disastrous impact upon clients of Connecticut's community health centers. Even in very difficult economic times, the State budget should be not be balanced disproportionately on the back of the State's poor. The impact of just a few of the proposed health program cuts are presented below:

1. The elimination of Non-Emergency Dental Services for Adults covered under the Medicaid and SAGA programs will NOT save the State money. Health Center clients denied preventive dental care will either: 1) Postpone seeking care until the dental problem becomes so acute that they will walk-in to a health center for an emergency visit. The emergency visit WILL be a covered service and a reimbursable visit. Without preventive coverage for additional work needed, the cycle of seeking emergency care will be repeated and repeated and the dentists' only choice will be to complete as much of the required treatment as possible during an emergency visit; or, 2.) Clients with emergency dental problems will go to the hospital emergency department for treatment, which will cost the State at least three times more for an ED visit than a health center visit. Many EDs are not equipped to handle oral health problems. After being seen in the ED, the client will be referred back to the health center for treatment. Hence, the State will pay for the ED visit and a health center emergency visit.

In either scenario, the oral health of clients will be compromised. Poor oral hygiene increases the co-morbidities of many chronic diseases and patients' healthcare needs will become more complex and costly. This proposed funding cut erodes the premise of establishing medical and dental homes for Title 19 and SAGA clients. Health Centers are the medical and dental "homes" that manage care so that clients' health conditions do not become exacerbated requiring more costly and extensive interventions. As a member of the Medicaid Managed Care Council, I know of the hours that are spent in discussion of the importance of care management, particularly under the Medicaid and SAGA programs.

2.) Freeze SAGA intake:

The SAGA program has enabled well over 43,000 thousand clients to receive medical, dental and behavioral health care. To freeze SAGA enrollment will create another

category of uninsured, adding to the ranks of the over 63,000 uninsured in the State as of 2007.

Uninsured clients will delay seeking care and will frequent the hospital emergency departments for medical, dental and behavioral health problems. Once again, the State will end of paying for more costly ED visits than if preventive visits were rendered at the community health centers.

3.) Cutting the Dept. of Public Health Grants to Community Health Centers by 25%:

The State's community health centers have received small rescissions in their grant/contract funds in many budget cycles. These grant/contract amount reductions have varied based upon determinations by the Dept. of Public Health. Even small budgetary rescissions have an impact upon workforce stability and health care delivery. A **25% reduction** in the Health Center line item grants, the School-Based Health Center grants, and the HIV/AIDS program grants will result in the **immediate** job loss of Physicians, Dentists, and mid-level providers. These are the Clinicians that are delivering care to the State's most vulnerable populations on a daily basis. Once a Health Center loses providers, it is very difficult to recruit new candidates for these positions, so the impact of the workforce loss is a prolonged one. Without an adequate workforce, the capability of the Health Centers to deliver care to Title 19, SAGA and the uninsured will be severely compromised. Waiting times for visits will increase as there will be less providers and less appointment slots. School-based health clinics will have to close. Diminished access to community-based care will force people to use the costly EDs.

At a time when the national health care reform efforts will rely, in part, on the nation's Community Health Centers, the Governor's proposed cuts will eradicate the infrastructure needed to deliver care to the medically underserved residents of CT. In 2008, the State's Community Health Centers delivered care to 263,043 persons for a total of 1,213,224 visits. Over 1/4 of a million residents benefitted from access to comprehensive, quality medical, dental and behavioral health services which have kept CT residents healthier, out of the hospital EDs, and have done so at the least cost to the State's health care system.

I urge the Legislature NOT to enact these proposed health program cuts.

Thank you.

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